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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/805,019
	Filing Date	July 20, 2004
	First Named Inventor	Robert S. Vunkannon, Jr.
	Art Unit	2862
	Examiner Name	
Total Number of Pages in This Submission	Attorney Docket Number	53353-9

ENCLOSURES (Check all that apply)		
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Davis Wright Tremaine LLP	
Signature		
Printed name	Brian L. Johnson	
Date	June 2, 2005	Reg. No. 40,033

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : Robert S. VunKannon, Jr.
Application No. : 10/805,019
Filed : July 20, 2004
For : DISPLACEMENT SENSING SYSTEM AND METHOD

Art Unit : 2862
Docket No. : 53353-9
Date : June 2, 2005

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

INFORMATION DISCLOSURE STATEMENT

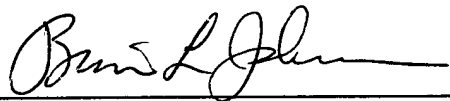
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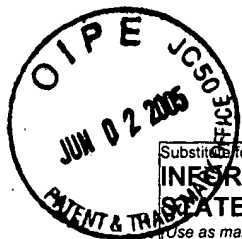
Respectfully submitted,
Robert S. VunKannon, Jr.

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Enclosure:
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Form PTO/SB/08

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Substitute for form 1449A/PTO

**INFORMATION DISCLOSURE
STATEMENT BY APPLICANT**

(Use as many sheets as necessary)

Complete if Known

Application Number	10/895,019
Filing Date	July 20, 2004
First Named Inventor	Vun Kannon, Robert
Group Art Unit	Unknown
Examiner Name	Unknown

Sheet 1 of 1

Attorney Docket No: 53353-009

US PATENT DOCUMENTS

Examiner Initial *	USP Document Number	Publication Date	Name of Patentee or Applicant of cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
	US-6,246,230	06/12/2001	Mednikov, Felix	
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	US-4,395,711	07/26/1983	Ward, Frank L..	

FOREIGN PATENT DOCUMENTS

Examiner Initials*	Foreign Document No	Publication Date	Name of Patentee or Applicant of cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T ²

OTHER DOCUMENTS -- NON PATENT LITERATURE DOCUMENTS

Examiner Initials*	Cite No ¹	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T ²

EXAMINER

DATE CONSIDERED

Substitute Disclosure Statement Form (PTO-1449)

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